PATENT

#21

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

John C. Harvey and James W. Cuddihy:

Group Art Unit: 2733

Serial No.:

08/448,644

Examiner: MARCELO, M.

Filed:

May 24, 1995

Atty. Docket: 05634.0163

For: SIGNAL PROCESSING APPARATUS AND METHODS

TRANSMITTAL LETTER

Received FEB 0 5 1999 Group 2700

BOX: AFTER FINAL

Assistant Commissioner of Patents and Trademarks Washington, D.C. 20231

- [] **Amendment**
- Request for Extension of Time Pursuant to 37 C.F.R. § 1.136(a) (in duplicate) [X]
- Information Disclosure Statement; [X]
- [X] PTO Form 1449;
- [X] 3 Prior Art References;
- [X] An additional filing fee is required, and is calculated as shown below:

	(Col 1)	<u>-</u>	(Col 2) Highest No.	(Col 3)		
	Claims			Present Extra	Rate	Additional Fee
	Remaining		Previously			
	After		Paid for			
	Amendment					
Total	*6	Minus	**20	=0	x \$ 22.00	\$0.00
Indep.	*3	Minus	***3	=0	x \$ 82.00	\$0.00
First Presentation of Mult. Dep. Claim					x \$ 270.00	\$0.00
Total Additional Filing Fee for Request for Extension of Time \$1360.00						
Fee for 37 C.F.R. 1.129(a) Submission \$760.00						\$760.00
Total Fee Enclosed \$2120						\$2120.00

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

- If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space. "The Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.
- [X] Howrey & Simon check no. 304843 in the amount of \$2120.00 is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees, or credit any overpayment to Deposit Account No. 08-3038.
 - Any filing fees under 37 CFR 1.16 for the presentation of extra claims. [x]
 - Any patent application processing fees under 37 CFR 1.17. [x]

Date: February 5, 1999 **HOWREY & SIMON**

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